PTO/SB/05 (11/00)

Approved for use through 10/31/2002. OMB 0651-0032
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3			U.S. Patent and Trademark Office U.S DEFINITION				
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			930008-2066				
UIILIII	First Inventor		Helmut Heide				
PATENT APPLICATION	Title RESORBABLE		BONE REPLACEMENT AND BONE FORMATION				
TRANSMITTAL		MATERIAL					
annications under 37 CFR 1 53(b))		s Mail Label No.	EL742671301US				

comy tor	new nonprovisional applications under 37 CFR 1.35(b)) Exploss that								
שׁ	APPLICATION ELEMENTS	Assistant Commissioner for Paten							
OT		ADDRESS TO: Box Patent Application Washington, DC 20231							
See M	PEP chapter 600 concerning utility patent application contents.								
1.	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)							
2.	Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)							
3.	Specification [Total Pages <u>25</u>] (preferred arrangement set forth below)	a. Computer Readable Form (CFR)							
	- Descriptive title of the invention	b. Specification sequence Listing on:							
	 Cross References to Related Applications Statement Regarding Fed sponsored R & D 	i. CD-ROM or CD-R (2 copies); or							
	- Reference to sequence listing, a table, or a computer	ii. paper c. Statements verifying identity of above copies							
	program listing appendix.	ACCOMPANYING APPLICATION PARTS							
Ent.	- Background of the Invention - Brief Summary of the Invention								
King King King King King mud Kind Kind had mad mad king	- Brief Description of the Drawings (if filed)	9. Assignment Papers (cover sheet & documents(s))							
	- Detailed Description	10. 37 CFR 3.73(b) Statement							
	Claim(s)Abstract of the Disclosure	Power of Attorney (when there is an assignee)							
4	Drawing(s)(35 U.S.C. 113) [Total Sheets 6]	11. English Translation Document (if applicable)							
5≋ Oath	n or Declaration [Total Pages 2]	12. Information Disclosure Copies of IDS							
ja.	Newly executed (original or copy) (unsigned)	Statement (IDS)/PTO-1449 Citations							
Ъ.	Copy from a prior application (37 CFR 1.63(d))	13. Preliminary Amendment							
	(for continuation/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503)							
	i. <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s)	(Should be specifically itemized)							
The state of the s	named in the prior application, see 37 CFR	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)							
	1.63(d)(2) and 1.33(b).	16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i).							
6.	Application Data Sheet. See 37 CFR 1.76.	Applicant must attach from PTO/SB/35 or its equivalent.							
ļ		17. Other: WIPO Publication Page: Chapter I amended claims;							
		check for \$370							
18.	If a CONTINUING APPLICATION, check appropriate box, as	nd supply the requisite information below and in a preliminary amendment, or							
	in an Application Data Sheet under 37 CFR 1.76:	-in-part (CIP) of prior application No.: PCT/EP00/08382 filed							
	Continuation Divisional Continuation	of prior application No.: <u>PCT/EP00/08382 filed</u> 08/28/00 which designates the US							
	Transis -	Group/Art Unit:							
	or application information: Examiner:	•							
Doy 5h	is considered a part of the disclosure of the accompanying continuation	of the prior application, from which an oath or declaration is supplied under on or divisional application and is hereby incorporated by reference.							
The inc	orporation <u>can only</u> be relied upon when a portion has been inadverte	ently omitted from the submitted application parts.							
	19. CORRESPONDENCE ADDRESS								
20999 (Insert Customer No. or Attach bar code label here) or Correspondence address below									
Customer Number of Bar Code Label									
Name	2 2	20,000							
	ime (Print/Type) Ronald R. Santucci	Registration No. (Attorney/Agent) 28,988 Date February 26, 2002							
Sig	gnature // /////////////////////////////////	Date February 26, 2002							

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 370.00

Complete if Known						
Application Number						
Filing Date						
First Named Inventor	Helmut Heide					
Examiner Name						
Group/Art Unit						
Attorney Docket No.	930008-2066					

METHOD OF PAYMENT				FEE CALCULATION								
1 The Commissioner is hereby authorized to charge				3. ADD	ITIONAL	FEES						
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Account 50-0320 Number		127	50	227	25	Surcharge – or Cover s	late provisional filing fee					
				139	130	139	130	Non-English	specification			
Charge any Additional Fee Required Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of				147	2,520	147	2,520	-	equest of reexamination			
Under 37 CFR 1.16 and 1.17 SE Note: The Maining of the Notice of Allowance					112	920*	112	920*	Examiner			
						113	1,840*	113	1,840*	Requesting Examine	publication of SIR after raction	
☐ Check ☐ Money Order ☐ Other				115	110	215	55	Extension fo	or reply within first month			
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1. BASIC FILING FEE				118	1,440	218	720	Extension for Month	or reply within fourth			
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			3051	OTAL(I)	370	141	1,280	241	640			
				142	1,280	242	640	•	fee (or reissue)			
[*] 2. EXTRA CLAIM FEES				143	460	243	230	Design issu	e ree			
			a Claim	Fee from below	Fee Paid	144	620	244	310	Plant issue	fee	
Total Claims	-20	**=	· ·	٠	=	122	130	122	130	Petitions to	the Commissioner	
Ind. Claims	-3*	"≖	,	K	=	123	50	123	50	Petitions re Applicati	lated to provisional ons	
Multiple Deper	ndent			ĸ	=	126	180	126	180	Submission Statemen	n of Information Disclosure int	
**	or number p	orevious	ly paid, if gre	eater; for reissues,	see below	581	40	581	40		each patent assignment per (times number of properties)	
		nall	Entity			146	740	246	370		omission after final rejection 1 129(a))	
		ee ode	Fee (\$)	Fee Des	cription	149	740	249	370	For each a	dditional invention to be d (37 CFR 1 129(b))	
103		03	9	Claims in excess of							· · · · · · · · · · · · · · · · · · ·	
		02	42	Independent claims		Other fee	(specify)					
		04 09	140 42 **	Multiple dependent claim, if not paid ** Reissue independent claims over original patent ** Reissue claims in excess of 20 and		1						
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						* Reduced by Basic Filing Fee						<i>\</i>
SUBMITTED BY									Complete (if applicable	28,988		
Typed or Printed Name Ropald R. Santucky					Date	1 0	26/02	Reg. Number Deposit Account	50-0320			
Signature MULL AVIII X 1						Date	1 2	20102	Deposit Account	30-0020		

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